Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	<u></u>
Case number (if known)	Chapter you are filing under:
	Chapter 7
	Chapter 11 Chapter 12
	Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	Shatara	
Write the name that is on	First name	First name
your government-issued picture identification (for	Middle name	Middle name
example, your driver's license or passport	Brooks Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last 8 years	First name	First name
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your	XXX - XX- 2289	xxx - xx-
Social Security number or federal	OR	OR
Individual Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 2 of 74

De	ebtor 1 Shatara	Brooks	Case number (if known)
	First Name	Middle Name Last Name	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	✓ I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the	Business name	Business name
	last 8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		6419 N. Bell Avenue, #2	- -
		Number Street	Number Street
		-	-
		Chicago Illinois 60645	
		City State Zip Code	City State Zip Code
		Cook	
		County	County
		•	
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing
		this mailing address.	address.
		Number Street	Number Street
			- N
			.
		City State Zip Code	City State Zip Code
6.	Why you are	Check one:	Check one:
	choosing this district to file for	✓ Over the last 180 days before filing this petition, I have	Over the last 180 days before filing this petition, I have
	bankruptcy	lived in this district longer than in any other district.	lived in this district longer than in any other district.
	Dalikiupicy		
		I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)
		-	
		-	

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 3 of 74

Debtor 1 Shatara	Brooks Case number (if known)
Part 2: Tell the Court Al	Middle Name Last Name bout Your Bankruptcy Case
7. The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box.
8. How you will pay the fee	 ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. ☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.
9. Have you filed for bankruptcy within the last 8 years?	No. ✓ Yes. District Northern District of Illinois When 2/23/2013
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓ No. Yes. Debtor District Debtor Debtor Debtor Relationship to you Case number, if known MM / DD / YYYYY Relationship to you
11. Do you rent your residence?	 ✓ No. Go to line 12. ✓ Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ✓ No. Go to line 12. ✓ Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition.

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 4 of 74

Debtor 1 Shatara		N A: ala		Brooks	Case number (if k	(nown)	
Part 3: Report About An	y Bus		_{lle Name} es You Own as a S	Last Name Sole Proprietor			
12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.		No.	Go to Part 4. Name and location of b Name of business, if ar Number City Check the appropriate Health Care Business Single Asset Research	Street Street	State <i>Ir busin</i> ess: n 11 U.S.C. § 101(27A)) rd in 11 U.S.C. § 101(51E	Zip Code	
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	dead opera	llines. If y ations, ca C. § 11 1 No.	ou indicate that you are a ash-flow statement, and a 6(1)(B). I am not filing under Ch I am filing under Chapt Bankruptcy Code.	a small business del federal income tax n napter 11. ter 11, but I am NOT	a small business debtor	most recent balance ocuments do not exi-	ce sheet, statement of ist, follow the procedure in 11
Part 4: Report if You Ow	n or	Have A	Any Hazardous Pro	operty or Any F	Property That Need	s Immediate A	Attention
14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate			What is the hazard? If immediate attention is r Where is the property?	needed, why is it nee	eded? Street		
attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?				City	State		Zip Code

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 5 of 74

Debtor 1 Shatara Brooks Case number (if known)

First Name Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of about credit counseling, you must file a motion for waiver of

credit counseling with the court.

credit counseling with the court.

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 6 of 74

Debtor 1 Shatara		Grooks Case number	(if known)				
First Name	Middle Name La	ast Name					
16. What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts.						
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	paid that funds will be available to distribute to unsecured creditors? No. Yes.						
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000				
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 millio \$100,000,001-\$500 millio	n \$10,000,000,001-\$50 billion				
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 millio \$100,000,001-\$500 millio	n \$10,000,000,001-\$50 billion				
Part 7: Sign Below							
For you	and correct. If I have chosen to file under C 11,12, or 13 of title 11, United S choose to proceed under Chape If no attorney represents me at me fill out this document, I have I request relief in accordance we I understand making a false state.	Chapter 7, I am aware that I may States Code. I understand the reter 7. Ind I did not pay or agree to pay be obtained and read the notice rewith the chapter of title 11, United atement, concealing property, or case can result in fines up to \$25, 1341, 1519, and 3571.	erjury that the information provided is true proceed, if eligible, under Chapter 7, elief available under each chapter, and I someone who is not an attorney to help required by 11 U.S.C. § 342(b). d States Code, specified in this petition. r obtaining money or property by fraud in 50,000, or imprisonment for up to 20 ature of Debtor 2 cuted on				

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 7 of 74

Debtor 1	Shatara		Brooks	Case number	(if known)
	First Name	Middle Name	Last Name		
you are by one If you a represe		eligibility to proceed up the relief available und to the debtor(s) the no certify that I have no ke petition is incorrect.	nder Chapter 7, 11, 12 der each chapter for v tice required by 11 U.	2, or 13 of title 11, U which the person is S.C. § 342(b) and, i	that I have informed the debtor(s) about United States Code, and have explained eligible. I also certify that I have delivered in a case in which § 707(b)(4)(D) applies, nation in the schedules filed with the
need to	o file this page.	/s/ Jaime Torres Signature of Attorney	for Debtor	Date	9/23/2016 MM / DD / YYYY
		Jaime Torres Printed name Semrad Law Firm Firm name 11101 S. Western Ave	enue		
		Chicago		Illinois	60643
		City		State	Zip Code
		Contact phone	3122542096	Email address	jtorres@semradlaw.com
		Bar number		Stat	te

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 8 of 74

Fill in this information to identify your case:						
Debtor 1	Shatara	Brooks				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing	First Name	Middle Name	Last Name			
United States B	Sankruptcy Court for the:	Northern	District of Illinois			
Case number (If known)			(State)			

Check if this is an
amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$18,653.00
1c. Copy line 63, Total of all property on Schedule A/B	\$18,653.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$32,073.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$20,672.68
Your total liabilities	\$52,745.68
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$4,500.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J	\$3,925.00

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 9 of 74

Deb		Shatara		Brooks	Case number (if known)						
		First Name	Middle Name	Last Name							
Part	4: A	Inswer These Ques	tions for Administra	ative and Statistical Re	cords						
6. A	6. Are you filing for bankruptcy under Chapters 7, 11, or 13?										
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.										
	✓ Yes.										
7. V	Vhat ki	ind of debt do you have	e?								
ı	_			ner debts are those incurred by out lines 8-10 for statistical pur		ersonal,					
	_	our debts are not primar s form to the court with you	-	have nothing to report on this	part of the form. Check this bo	x and submit					
			Current Monthly Income 122B Line 11; OR, Form 1	e: Copy your total current moni 122C-1 Line 14.	thly income from Official		\$4,500.00				
9.	Сору	y the following special c	ategories of claims fron	n Part 4, line 6 of Schedule E	E/F:						
	From	n Part 4 on Schedule E/I	-, copy the following:		Total claim	i					
	9a. D	omestic support obligatio	ns (Copy line 6a.)		\$0.00						
	9b. Ta	axes and certain other deb	ts you owe the governmen	it. (Copy line 6b.)	\$0.00						
	9c. C	laims for death or persona	al injury while you were into	oxicated. (Copy line 6c.)	\$0.00						
	9d. S	tudent loans. (Copy line 6	f.)		\$1.00						
		Obligations arising out of a ty claims. (Copy line 6g.)	separation agreement or o	divorce that you did not report	as \$0.00						
	·		naring plans, and other sin	nilar debts. (Copy line 6h.)	\$0.00						
	9a T	intal Add lines 9a through	o Qf		\$1.00						

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 10 of 74

Debtor 1		Shatara			Brooks			
		First Name	Middle N	lame				
Debtor 2	if filing)	-						
(Spouse,	ii iiiing,	First Name	Middle N	lame	Last Name			
United St	ates Ba	ankruptcy Court for the:	Northern		District of Illinois			
Case nun	nber				(State)			
Officia	al Fo	orm 106A/B					1	Check if this is an amended filing
Sche	dul	e A/B: Prope	erty					12/1
category v responsib write your	where le for name	you think it fits best. B supplying correct info and case number (if kr	e as complete and rmation. If more s nown). Answer ev	d acc space ery o	sset only once. If an asset fits in more curate as possible. If two married peope is needed, attach a separate sheet to juestion. d, or Other Real Estate You Ow	le are fi this fo	iling together, both are or rm. On the top of any a	equally
					residence, building, land, or similar pr			
V	No. G	6o to Part 2	•	•				
	Yes. \	Where is the property?						
1.1	Stree	t address, if available, or	other description		at is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home		the amount of any secure	aims or exemptions. Put ed claims on Schedule D: eims Secured by Property. Current value of the portion you own?
	Numk	per Street			Land		December the material of	
					Investment property Timeshare Other		Describe the nature of interest (such as fee si the entireties, or a life	mple, tenancy by
	City	State	Zip Code	one	o has an interest in the property? Che	eck	Check if this is con (see instructions)	mmunity property
					er information you wish to add about	this ite	m, such as local	
.,				pro	perty identification number:		· 	
1.2		have more than one, list taddress, if available, or			at is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative		Current value of the	ed claims on Schedule D: nims Secured by Property. Current value of the
				Ħ	Manufactured or mobile home Land		entire property?	portion you own?
	Numb	per Street State	Zip Code		Investment property Timeshare Other		Describe the nature of interest (such as fee si the entireties, or a life	mple, tenancy by
				Wh	o has an interest in the property? Che	eck	Check if this is con (see instructions)	mmunity property
					Debtor 1 only		Ц	
					Debtor 2 only			
					Debtor 1 and Debtor 2 only			
					At least one of the debtors and another			
				Oth	er information you wish to add about	this ite	m, such as local	

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 11 of 74

Debtor 1	Shatara First Name	Middle Name	Brooks Last Name	Case number	(if known)	_
1.3Stree	et address, if available, or otl	[What is the property? Check all that app Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	ly.	Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property?	
Nur City	nber Street State	Zip Code	Land Investment property Timeshare Other Who has an interest in the property?	Check one.	Describe the nature of interest (such as fee sit the entireties, or a life of the check if this is confident instructions)	mple, tenancy by estate), if known.
			Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another other information you wish to add aborroperty identification number:	ut this item,	(see instructions)	
			Il of your entries from Part 1, including			
Do you o vyou own th	at someone else drives. If you ins, trucks, tractors, sport utili	equitable interest ir u lease a vehicle, als	n any vehicles, whether they are regist o report it on Schedule G: Executory Cont cles			
3.1	Model: Year:	Toyota Camry LE 2015	Who has an interest in the propert one. Debtor 1 only	y? Check		laims or exemptions. Put ed claims on Schedule D: nims Secured by Property.
	Approximate mileage: Other information:	57901	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this is community prop		Current value of the entire property? \$11450.00	Current value of the portion you own? \$11450.00
3.2	Make Model: Year: Approximate mileage:	Lexus ES 350 2007 158000	instructions) Who has an interest in the propert one. Debtor 1 only	y? Check	Do not deduct secured of the amount of any secure Creditors Who Have Cla	
	Other information:	130000	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this is community proj		Current value of the entire property? \$6200.00	Current value of the portion you own? \$6200.00
			instructions)			

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 12 of 74

Debtor 1		Brooks Case number	r (if known)	
	First Name Middle N	ame Last Name		
3.3	Make	Who has an interest in the property? Check		laims or exemptions. Put
	Model:	one.	•	ed claims on Schedule D:
	Year:	Debtor 1 only	Creditors who have Cit	aims Secured by Property.
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see instructions)		
3.4		Who has an interest in the property? Check		laims or exemptions. Put
	Model:	one.	•	ed claims on Schedule D:
	Year:	Debtor 1 only	Creditors who have Cit	aims Secured by Property.
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see instructions)		
└	Yes Make	Who has an interest in the property? Check	Do not deduct secured o	laims or exemptions. Put
4.1	Model:	one.		ed claims on <i>Schedule D:</i>
	Year:	Debtor 1 only		aims Secured by Property.
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Cuter information.	At least one of the debtors and another		
		Check if this is community property (see instructions)		
4.2	Make	Who has an interest in the property? Check	Do not deduct secured of	laims or exemptions. Put
	Model:	one.	•	ed claims on Schedule D:
	Year:	Debtor 1 only	Creditors Who Have Cla	aims Secured by Property.
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see instructions)		
		vn for all of your entries from Part 2, including any entrie	1 51/	7650.00
	wa attached for Dort 2 Write that num	ber here	<u> </u>	

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 13 of 74

D	ebtor 1			number (if known)	
		First Name	Middle Name Last Name		
Pa	art 3:	Describe Y	our Personal and Household Items		
D	o you	own or ha	ave any legal or equitable interest in any of the following ite	ems?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6	6. Hous	ehold goods	and furnishings		
	Examp	les: Major app	liances, furniture, linens, china, kitchenware		
	No				
✓	Yes. [Describe	Misc. Household Furniture and Goods		\$250.00
			s and radios; audio, video, stereo, and digital equipment; computers, printers, scar	nners; music	
늗	No No	N			
⊻	Yes. L	Describe	Misc. Electronics		\$150.00
	Examp	•	ue and figurines; paintings, prints, or other artwork; books, pictures, or other art objec in, or baseball card collections; other collections, memorabilia, collectibles	cts;	
\leq					
L	Yes. D	Describe			
		les: Sports, ph	orts and hobbies otographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, s; carpentry tools; musical instruments	, skis; canoes	
$\overline{\mathbf{Z}}$	No				
	Yes. D	Describe			
	No		es, shotguns, ammunition, and related equipment		
	1. Clot		clothes, furs, leather coats, designer wear, shoes, accessories		
	No				
)escribe	Lload Clothing		
Ľ	103. L	Describe	Used Clothing		\$250.00
	2. Jewe Examp	•	ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watc	ches, gems,	
		Describe	Misc. Jewelry		•
		-farm animal	,		\$50.00
	Examp		s, birds, horses		
烂		N			
L	Yes. [Describe			
1	4. Any	other persor	nal and household items you did not already list, including any health aids y	you did not list	
✓	No				
	Yes. [Describe			
1	5. Add	the dollar va	lue of all of your entries from Part 3, including any entries for pages you ha	ave attached	\$700.00
f	or Part	3. Write that	number here	>	ψ, ου.υυ

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 14 of 74

Den	Silatara	Malalla Marana	DIOUKS	Case number (ii known)	
Part	First Name	Middle Name r Financial Assets	Last Name		
		any legal or equitable int	erest in any of the foll	owing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	Cash				
E		ave in your wallet, in your home, in a	safe deposit box, and on hand	when you file your petition	
	☐ No ✓ Yes				\$5.00
				Cash:	φ5.00
17.	Examples: Checking,	savings, or other financial accounts institutions. If you have multiple acc		s in credit unions, brokerage houses, list each.	
	✓ Yes		Institution name:		
		17.1. Checking account:			
		17.2. Checking account:			
		17.3. Savings account:			
		17.4. Savings account:			
		17.5. Certificates of deposit:			
		17.6. Other financial account:	Wells Fargo		\$298.00
		17.7. Other financial account:	Trone range		<u> </u>
		17.8. Other financial account:			-
		17.9. Other financial account:			
10	Banda mutual fund				
18.		s, or publicly traded stocks s, investment accounts with brokerag	ge firms, money market account	ds	
	✓ No				
	Yes	Institution or issuer name:			
19.	Non-publicly traded an LLC, partnership		ated and unincorporated bu	sinesses, including an interest in	
	✓ No	•			
	Yes. Give specific	Name of entity		% of ownership:	
	information about them	-			

Official Form 106A/B Schedule A/B: Property page 5

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 15 of 74

Dep		Shatara		Brooks	Case number (if known)		
		First Name	Middle Name	Last Name			
20.	 Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. 						
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.							
	✓	No					
		Yes. Give specific					
		information about them	Issuer name:				
		u 10111					
21.	Reti	rement or pension	accounts				
			A, ERISA, Keogh, 401(k), 403(b)	, thrift savings accounts, or	other pension or profit-sharing plans		
	=	No Vaa Listaask	Type of account:	Institution name:			
		Yes. List each account	401(k) or similar plan:				
	:	separately.	Pension plan:			- '	
			IRA:				
				-			
			Retirement account:				
			Keogh:			_	
			Additional account:			_	
			Additional account:				
22.		urity deposits and p			,		
			leposits you have made so that yo vith landlords, prepaid rent, public				
		panies, or others		,			
		No		Institution name:			
	Ш	Yes	Electric:				
			Gas:			_	
			Heating oil:				
			Security deposit on rental unit:			_	
			Prepaid rent:				
			Telephone:			-	
			Water:	_			
			Rented furniture:				
			Other:			-	
						-	
23.		uities (A contract for No	a periodic payment of money to y	ou, either for life or for a nu	mber of years)		
			Issuer name and description:				
	Ш	Yes					

Official Form 106A/B Schedule A/B: Property page 6

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 16 of 74

Debt	or 1 Shatara	Middle N		Case number (if known)	
24.	First Name	Middle N	lame Last Name Dunt in a qualified ABLE program, or under a	qualified state tuition program	
24.		0(b)(1), 529A(b), and 529(b)		qualified state tuttori program	<u>.</u>
	✓ No				
	in In	stitution name and descripti	on. Separately file the records of any interests.11 L	J.S.C. § 521(c):	
	Yes				
	_				
	_			_	
25.	Trusts, equitab exercisable for		roperty (other than anything listed in line 1), a	and rights or powers	
		, ca. 20.10.11			
	✓ No Yes. Describ	20			1
	I ics. Describ				
26.			ecrets, and other intellectual property , proceeds from royalties and licensing agreements	S	
		,	, , ,		
	✓ No				7
	Yes. Describ	Je			
27.		hises, and other general i	intangibles ses, cooperative association holdings, liquor licens	see professional licenses	
	_	ig permits, exclusive licens	es, cooperative association notatings, liquol licens	ses, professional licerises	
	✓ No				7
	Yes. Describ	De			
Mor	ney or proper	ty owed to you?			Current value of the
Mor	ney or proper	ty owed to you?			portion you own?
Mor	ney or proper	ty owed to you?			
	ney or proper				portion you own? Do not deduct secured
					portion you own? Do not deduct secured
	Tax refunds owe	ed to you		Federal:	portion you own? Do not deduct secured
	Tax refunds owe ✓ No ☐ Yes. Give speabout the	ed to you ecific information nem, including whether			portion you own? Do not deduct secured claims or exemptions. \$0.00
	Tax refunds owe ✓ No ☐ Yes. Give spe about the you alree	ed to you		Federal: State:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00
28.	Tax refunds owe No Yes. Give spr about th you alre and the	ed to you ecific information nem, including whether eady filed the returns			portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds owe No Yes. Give spends about the you alreand the	ecific information nem, including whether eady filed the returns tax years	pusal support, child support, maintenance, divorce s	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00
28.	Tax refunds owe No Yes. Give spreabout the you alread the Family support Examples: Past defined the support of the support	ecific information nem, including whether eady filed the returns tax years	ousal support, child support, maintenance, divorce s	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00
28.	Tax refunds owe ✓ No Yes. Give spendout the you alread the Family support Examples: Past do ✓ No	ed to you ecific information nem, including whether eady filed the returns tax years	ousal support, child support, maintenance, divorce s	State: Local: settlement, property settlement	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owe ✓ No Yes. Give spendout the you alread the Family support Examples: Past do ✓ No	ecific information nem, including whether eady filed the returns tax years	ousal support, child support, maintenance, divorce s	State: Local: settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owe ✓ No Yes. Give spendout the you alread the Family support Examples: Past do ✓ No	ed to you ecific information nem, including whether eady filed the returns tax years	ousal support, child support, maintenance, divorce s	State: Local: settlement, property settlement	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owe ✓ No Yes. Give spendout the you alread the Family support Examples: Past do ✓ No	ed to you ecific information nem, including whether eady filed the returns tax years	ousal support, child support, maintenance, divorce s	State: Local: settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owe ✓ No Yes. Give spendout the you alread the Family support Examples: Past do ✓ No	ed to you ecific information nem, including whether eady filed the returns tax years	ousal support, child support, maintenance, divorce s	State: Local: settlement, property settlement Alimony: Maintenance: Support:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owe ✓ No Yes. Give spendout the you alread the Family support Examples: Past do ✓ No	ed to you ecific information nem, including whether eady filed the returns tax years	ousal support, child support, maintenance, divorce	State: Local: settlement, property settlement Alimony: Maintenance:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owe ✓ No Yes. Give spendout the you alread the Family support Examples: Past do ✓ No	ed to you ecific information nem, including whether eady filed the returns tax years	ousal support, child support, maintenance, divorce s	State: Local: settlement, property settlement Alimony: Maintenance: Support:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owe ✓ No ☐ Yes. Give spreabout the you alread and the Family support Examples: Past do ✓ No ☐ Yes. Give spreadout the your alread and the your alread	ed to you ecific information nem, including whether eady filed the returns tax years		State: Local: settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owe ✓ No ☐ Yes. Give spreabout the you alread and the Family support Examples: Past do ✓ No ☐ Yes. Give spread of Yes. Give sprea	ed to you ecific information nem, including whether eady filed the returns tax years ue or lump sum alimony, spo- ecific information	e payments, disability benefits, sick pay, vacation pa	State: Local: settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owe ✓ No ☐ Yes. Give spend about the you alread and the Family support Examples: Past do ✓ No ☐ Yes. Give spend Yes. Give spend Yes. Give spend Yes. Unpaid Social	ed to you ecific information nem, including whether eady filed the returns tax years ue or lump sum alimony, spo- ecific information		State: Local: settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owe ✓ No Yes. Give spreabout the you alree and the Family support Examples: Past do ✓ No Yes. Give spreadout the your alree and	ed to you ecific information nem, including whether eady filed the returns tax years ue or lump sum alimony, sponecific information someone owes you d wages, disability insurance Security benefits; unpaid loa	e payments, disability benefits, sick pay, vacation pa	State: Local: settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owe ✓ No ☐ Yes. Give spend about the you alread and the Family support Examples: Past do ✓ No ☐ Yes. Give spend Yes. Give spend Yes. Give spend Yes. Unpaid Social	ed to you ecific information nem, including whether eady filed the returns tax years ue or lump sum alimony, sponecific information someone owes you d wages, disability insurance Security benefits; unpaid loa	e payments, disability benefits, sick pay, vacation pa	State: Local: settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 17 of 74

Deb	otor 1 Shatara	Brooks	Case number (if known)	
	First Name	Middle Name Last Name		
31.	Interests in insurance policies Examples: Health, disability, or life in	nsurance; health savings account (HSA)	; credit, homeowner's, or renter's insurance	
	Yes. Name the insurance composite of each policy and list its value.		Beneficiary:	Surrender or refund value:
32.	If you are the beneficiary of a living to property because someone has died		ce policy, or are currently entitled to receive	
	Yes. Describe			
33.		ether or not you have filed a lawsuit or disputes, insurance claims, or rights to su		
	✓ No ☐ Yes. Describe			
34.	Other contingent and unliquidat to set off claims	ed claims of every nature, including	counterclaims of the debtor and rights	
	✓ No Yes. Describe			
35.	Any financial assets you did not a	already list		
	✓ No Yes. Describe			
36.		r entries from Part 4, including any ei		\$303.00
Part	t5: Describe Any Business	-Related Property You Own or	Have an Interest In. List any real estate	in Part 1.
37.	Do you own or have any legal or	equitable interest in any business-rel	ated property?	
	✓ No. Go to Part 6. Yes. Go to line 38.	,		Current value of the portion you own? Do not deduct secured claims or exemptions
38.	Accounts receivable or commiss No	ions you already earned		
	Yes. Describe			
39.	Office equipment, furnishings, a Examples: Business-related compu		, fax machines, rugs, telephones, desks, chairs, electro	onic devices
	✓ No Yes. Describe			

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 18 of 74

Deb	tor 1 Shatara	Brooks Case number (if known)	
40.	First Name Machinery fixtures ed	Middle Name Last Name quipment, supplies you use in business, and tools of your trade	
+∪.		pulpinoni, supplies you use in business, and tools of your trade	
	✓ No Yes. Describe		
	Teo. Describe		
41.	Inventory		
	✓ No		
	Yes. Describe		
42.	Interests in partnersh	ips or joint ventures	
	✓ No	Name of entity: % of ownership:	
	Yes. Give specific	rvanie di entity. // di ownership.	
	information about them		_
43. (Customer lists, mailing	lists, or other compilations	
	✓ No		
	Yes. Do your lists in	clude personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	□ No		
	Yes. Desc	ribe	
44	Any by since related	property year alid not already list	
44.		property you did not already list	
	✓ No		<u> </u>
	Yes. Give specific information		
			_
			
		Ill of your entries from Part 5, including any entries for pages you have attached r here	
			1
Part		Farm- and Commercial Fishing-Related Property You Own or Have an Interest n interest in farmland, list it in Part 1.	in.
46.	Do you own or have a	any legal or equitable interest in any farm- or commercial fishing-related property?	
	✓ No. Go to Part 7.		Current value of the
	Yes. Go to line 47.		portion you own? Do not deduct secured
	_		claims
47	Form only -1-		or exemptions
47.	Farm animals Examples: Livestock, po	oultry, farm-raised fish	
	√ No		
	Yes. Describe		
			l

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 19 of 74

Debt	tor 1	Shatara First Name	Middle Name	Brooks Last Name	Case number (if known)	
48.	Cre	ops-either growing o		Last Name		
40.			or narvested			
		No				
	Ш	Yes. Describe				
49.	Far	m and fishing equip	ment, implements, machinery, fixt	ures, and tools of trade	e	
	~	No				
		Yes. Describe				
E 0	For	m and fiching cumpl	ion shaminals and food			
50.			ies, chemicals, and feed			
	Ш	Yes. Describe				
51.	An	y farm- and commer	cial fishing-related property you die	d not already list		
	✓	No				
		Yes. Describe				
					Γ.	
			of your entries from Part 6, includi			
IUI F	art 0	. Write that number i	iere			
Dest	7.	Deceribe All Dra	marty Vay Own ar Haya an I	ntoroot in That Vo.	. Did Not List Above	
Part 53			operty You Own or Have an I erty of any kind you did not alread		I DIG NOT LIST ABOVE	
55.			, country club membership	y list:		
	\checkmark	No				1
		Yes. Give specific				
		information				
54. A	dd tl	he dollar value of all	of your entries from Part 7. Write t	hat number here	>	
Part	8:	List the Totals o	of Each Part of this Form			
55. F	Part	1: Total real estate, li	ne 2		>	
56. r	art :	2 total vehicles, line	5	447050.00		
_				\$17650.00	_	
		•	I household items, line 15	\$700.00	<u> </u>	
		l: Total financial asso		\$303.00	<u> </u>	
59. F	art	5: Total business-re	lated property, line 45		<u> </u>	
60. F	art	6: Total farm- and fis	shing-related property, line 52		<u></u>	
61. F	Part '	7: Total other proper	rty not listed, line 54		<u> </u>	
62. 1	Total	personal property.	Add lines 56 through 61	\$18653.00		+ \$18653.00
					Copy personal property total ▶	
						\$18653.00
63. T	otal	of all property on So	chedule A/B. Add line 55 + line 62			

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 20 of 74

Fill in this information to identify your case:						
Debtor 1	Shatara		Brooks			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if fili	^{ng)} First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Northern	District of Illinois(State)			
Case number (If known)			(Glate)			

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	Part 1: Identify the Property You Claim as Exempt						
1.	Which set of exemptions are you claimi	ing? Check one only, e	ven if your spouse is filing with you.				
	✓ You are claiming state and federal nonb	pankruptcy exemptions.	11 U.S.C. § 522(b)(3)				
	You are claiming federal exemptions. 1	1 U.S.C. § 522(b)(2)					
2.	For any property you list on Schedule A	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption			
	Brief description: Toyota, Camry LE, 2015 Line from Schedule A/B: 03	\$11,450.00	\$0 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)			
	Brief description: Misc. Household Furniture and Goods Line from Schedule A/B: 06	\$250.00	\$250.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)			
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cover No Yes	y 3 years after that for ca					

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 21 of 74

Debtor 1 Shatara			Brooks	Case number (if known)	
First Name		lle Name	Last Name		
Part 2: Addition	nal Page				
	ion of the property and ule A/B that lists this	Current value of the portion you own Copy the value from Schedule A/B		the exemption you claim one box for each exemption.	Specific laws that allow exemption
Brief description:		\$250.00	✓	\$250.00	735 ILCS 5/12-1001(a)
Used Clot Line from Schedule A/B:	<u>11</u>			fair market value, up to any ole statutory limit	_
Brief description:		\$150.00	✓	\$150.00	735 ILCS 5/12-1001(b)
Misc. Electric Line from Schedule A/B:	etronics 07			f fair market value, up to any ole statutory limit	_
Brief description:		\$50.00	V	\$50.00	735 ILCS 5/12-1001(b)
Misc. Jewe Line from Schedule A/B:	<u>12</u>			fair market value, up to any ole statutory limit	_
Brief description:		\$5.00	✓	\$5.00	735 ILCS 5/12-1001(b)
Cash on F Line from Schedule A/B:	Hand 16			f fair market value, up to any ble statutory limit	_
Brief description:		\$298.00	V	\$200.00	735 ILCS 5/12-1001(b)
Wells Fargument Line from Schedule A/B:	go			\$298.00 f fair market value, up to any ole statutory limit	_

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 22 of 74

Fill in	this inform	nation to identify your case:	:				
Debto	or 1	Chatara		Brooks			
Debit	JI I	Shatara First Name	Middle Name	Last Name			
Debte	or 2						
		First Name	Middle Name	Last Name			
Unite	d States B	ankruptcy Court for the:	Northern	District of Illinois (State)			
Case (If kno	number own)			(State)			
Off	icial F	Form 106D			ļ		heck if this is an
			ors Who Ha	ve Claims Secur	ed by Pro		mended filing 12/15
Be as space and ca	complete is needed ase numb Do any cre	and accurate as possibled, copy the Additional Pa er (if known). Peditors have claims secu	le. If two married people age, fill it out, number th red by your property?	are filing together, both are equal e entries, and attach it to this form ur other schedules. You have nothing	ly responsible for so n. On the top of any	upplying correct inform additional pages, write	
	✓ Yes. F	ill in all of the information b	pelow.				
Part '	1: List	All Secured Claims					
2.	for each of much as p	claim. If more than one creepossible, list the claims in a	ditor has a particular claim	red claim, list the creditor separately is the other creditors in Part 2. As ing to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	Santande Creditor's	r Consumer USA Name	Describe the property	that secures the claim:	\$19,636.00	\$11,450.00	\$8,186.00
	Debte Debte Debte At leas anoth	Texas 76161 State ZIP Code es the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and her ck if this claim relates community debt	Contingent Unliquidated Disputed Nature of lien. Check a An agreement you r car loan)	nade (such as mortgage or secured as tax lien, mechanic's lien) a lawsuit ght to offset)			
2.2	Honor Fir		Describe the property	that secures the claim:	\$12,437.00	\$6,200.00	\$6,237.00
	Creditor's PO Box						
	Numbe			the claim is: Check all that apply.			
		n Illinois 60204	Contingent				
	City Who ow	State ZIP Code es the debt? Check one.	Unliquidated				
		or 1 only	Disputed				
	Debt	or 2 only	Nature of lien. Check a	,			
		or 1 and Debtor 2 only	An agreement you r car loan)	made (such as mortgage or secured			
		ast one of the debtors and		as tax lien, mechanic's lien)			
		ck if this claim relates	Judgment lien from	a lawsuit			
	to a Date deb	community debt	Other (including a ri	·			
	incurred		Last 4 digits of accou	nt number5701			
		Add the dollar value of y	your entries in Column	A on this page. Write that	\$32,073.00		

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 23 of 74

Filli				<u></u>			
_	n this information to identify yo	ur case:					
Deb	otor 1 Shatara		Brooks				
	First Name	Middle Name	Last Name				
	otor 2						
(Spc	ouse, if filing) First Name	Middle Name	Last Name				
Unit	ed States Bankruptcy Court fo	r the: Northern	District of Illinois				
			(State)				
	se number nown)						
\	ficial Form 106E	/ 			Ch	eck if this is ar	n amended filing
		<u> </u>					· ·
Sc	:hedule E/F: (Creditors Who	o Have Unsecure	ed Claims			12/15
106Á that a	VB) and on <i>Schedule G: Exe</i> are listed in <i>Schedule D: Cr</i> es in the boxes on the left. <i>I</i>	ecutory Contracts and Unexp editors Who Hold Claims Sec	Ild result in a claim. Also list execute ired Leases (Official Form 106G). Do cured by Property. If more space is to this page. On the top of any add	o not include any cree needed, copy the Pa	ditors with rt you nee	partially sec d, fill it out, n	ured claims umber the
know		IORITY Unsecured Clair	ms				
know	List All of Your PR	IORITY Unsecured Clair					
know Part	List All of Your PR						
know Part	List All of Your PR Do any creditors have prio						
know Part	Do any creditors have prio ✓ No. Go to Part 2. ✓ Yes. List all of your priority uns listed, identify what type of clamuch as possible, list the cla Continuation Page of Part 1.	rity unsecured claims against ecured claims. If a creditor has aim it is. If a claim has both priori ms in alphabetical order accord If more than one creditor holds		im here and show both more than two priority υ rs in Part 3.	priority and	I nonpriority ar	mounts. As

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 24 of 74

Debto		rooks Case number (if known)							
	First Name Middle Name Last Name								
	Part 2: List All of Your NONPRIORITY Unsecured Claims								
3.	Do any creditors have nonpriority unsecured claims against you?								
	No. You have nothing to report in this part. Submit this form to the	ne court with your other schedules.							
	✓ Yes.								
4.	List all of your nonpriority unsecured claims in the alphabetica	al order of the creditor who holds each claim. If a creditor has more t	nan one priority						
	• • •	n claim listed, identify what type of claim it is. Do not list claims already inc							
	If more than one creditor holds a particular claim, list the other credit Page of Part 2.	ors in Part 3.If you have more than four priority unsecured claims fill out t	ne Continuation						
	rage of Part 2.		Total alaba						
	A COOLINE LIQUID ATION OF		Total claim						
4.1	ACCOUNT LIQUIDATION SE Nonpriority Creditor's Name	Last 4 digits of account number	\$7.00						
	304 W WATER ST	When was the debt incurred?n/a							
	Number Street	As of the date you file, the claim is: Check all that apply.							
		Contingent							
	DECORAH lowa 52101	Unliquidated							
	City State Zip Code Who incurred the debt? Check one.								
	Debtor 1 only	Disputed							
	Debtor 2 only	Type of NONPRIORITY unsecured claim:							
	Debtor 1 and Debtor 2 only	Student loans							
	At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 							
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar							
	Is the claim subject to offset?	debts Other. Specify Casey's General Store							
	✓ No	✓ Other. Specify <u>Casey's General Store</u>							
	Yes								
4.2	AFNI, INC.	Last 4 digits of account number	\$197.95						
	Nonpriority Creditor's Name PO BOX 3427								
	Number Street	When was the debt incurred?n/a							
		As of the date you file, the claim is: Check all that apply.							
		Contingent							
	BLOOMINGTON Illinois 61702	Unliquidated							
	City State Zip Code	Disputed							
	Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:							
	Debtor 2 only	Student loans							
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce							
	'	that you did not report as priority claims							
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar							
	Check if this claim relates to a community debt	debts ✓ Other. Specify Unknown							
	Is the claim subject to offset?	Ondown							
	✓ No								
_	Yes								
4.3	American InforSource LP as agent for Midland Funding LLC Nonpriority Creditor's Name	Last 4 digits of account number	\$529.10						
	c/o Lovette Walls	When was the debt incurred?n/a							
	Number Street	As of the date you file, the claim is: Check all that apply.							
	PO Box 268941	Contingent							
	0111 07 0111	Unliquidated							
	Oklahoma City Oklahoma 73126 City State Zip Code	_ Disputed							
	Who incurred the debt? Check one.	<u> </u>							
	Debtor 1 only	Type of NONPRIORITY unsecured claim:							
	Debtor 2 only	Student loans							
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce							
	At least one of the debtors and another	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar							
	Check if this claim relates to a community debt	debts							
	Is the claim subject to offset?	✓ Other. Specify Loan							
	✓ No								
	Yes								

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 25 of 74

Debtor 1 Shatara **Brooks** Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** ASSOCIATED BANK 4.4 \$500.00 Last 4 digits of account number _ Nonpriority Creditor's Name 200 N ADAMS ST When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent GREEN BAY Wisconsin 54301 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Bank NSF Fees Other. Specify_ **✓** No Yes 4.5 Blackhawk Auto Finance \$6,135.26 Last 4 digits of account number Nonpriority Creditor's Name 2340 S River Rd When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 60018 Des Plaines Illinois Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? Repossessed 2002 Oldsmobile **V** No Other. Specify Bravado Yes **Bronston Chiropractic Clinics** 4.6 \$38.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO Box 2288 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 54602 La Crosse Wisconsin Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify __ Medical Bill Is the claim subject to offset? **✓** No

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 26 of 74

Debtor 1 Shatara **Brooks** Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** CENTRAL CREDIT SERVICE 4.7 \$309.00 Last 4 digits of account number Nonpriority Creditor's Name 9550 REGENCY SQUARE BLVD When was the debt incurred? 5/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** Florida 32225 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? **✓** 001 Collection; Collecting for **✓** No ORIGINAL CREDITOR: Other. Specify __ MEDICAL PAYMENT DATA Yes 4.8 City of Chicago Parking \$1,200.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 121 N. LaSalle St # 107A Number As of the date you file, the claim is: Check all that apply. Contingent 60602 Chicago Illinois Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? Parking Tickets and Red Light **✓** No Other. Specify Violations Yes Comcast 4.9 \$502.00 Last 4 digits of account number Nonpriority Creditor's Name 11621 E. Marginal Way # 5 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Bankruptcy Dept Contingent Seattle Washington 98168 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify _ Cable Bill **✓** No

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 27 of 74

Debtor 1 Shatara **Brooks** Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Cottonwood Financial Illinois, LLC \$194.74 Last 4 digits of account number Nonpriority Creditor's Name 1901 Gateway Dr., Suite 200 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent 75038 Irving Texas Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify_ Loan **✓** No l Yes 4.11 Creditors Collection Bureau, Inc. \$2,356.47 Last 4 digits of account number Nonpriority Creditor's Name PO Box 63 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 60901 Kankakee Illinois Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Collection ✓ Other. Specify **✓** No Yes 4.12 **DIVERSIFIED CONSULTANT** \$222.00 Last 4 digits of account number _ Nonpriority Creditor's Name 10550 DEERWOOD PARK BLVD When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** Florida Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for Other. Specify ORIGINAL CREDITOR: AT T **✓** No

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 28 of 74

Debtor 1 Shatara **Brooks** Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 Domino's Pizza \$100.16 Last 4 digits of account number Nonpriority Creditor's Name 30 Frank Lloyd Wright Dr When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 48105 Michigan Ann Arbor City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.14 First Loan Financial \$400.00 Last 4 digits of account number Nonpriority Creditor's Name 6421 W North Ave When was the debt incurred? n/a Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60302 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify _ Payday Loan Is the claim subject to offset? **✓** No Yes 4.15 Gundersen Clinic LTD \$759.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 2288 When was the debt incurred? n/a Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated La Crosse Wisconsin 54602 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify Medical Bill Is the claim subject to offset? **✓** No

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 29 of 74

Debtor 1 Shatara **Brooks** Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 I C SYSTEM INC \$77.00 Last 4 digits of account number Nonpriority Creditor's Name 444 Hwy 96 E When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Saint Paul City 55127 Minnesota Unliquidated State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? V 001 Collection; Collecting for **✓** No Other. Specify ORIGINAL CREDITOR: ŘCN ☐ Yes 4.17 Midamerican Energy \$450.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 106 E 2nd St # 715B Number As of the date you file, the claim is: Check all that apply. Contingent 52801 Davenport Iowa Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? Electric Bill Other. Specify _ **V** No Yes 4.18 **OAC Collections Specialists** \$344.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO Box 500 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 53913 Baraboo Wisconsin City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts ✓ Other. Specify <u>Wellington Radiology Group</u> Is the claim subject to offset? **✓** No

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 30 of 74

Debtor 1 Shatara **Brooks** Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** Presence Saints Mary 4.19 \$2,200.00 Last 4 digits of account number Nonpriority Creditor's Name 2233 W Division St When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Chicago Illinois 60622 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify Medical Bill **✓** No Yes 4.20 Rehabilitation Services \$3,400.00 Last 4 digits of account number Nonpriority Creditor's Name 100 W. Randolph Street When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60601 State Zip Code Citv Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Medical Bill ✓ Other. Specify ____ Is the claim subject to offset? **✓** No Yes 4.21 **TCF** \$500.00 Last 4 digits of account number Nonpriority Creditor's Name 500 Joliet Rd. When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Willowbrook Illinois 60527 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify Bank NSF Fees **✓** No

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 31 of 74

Shatara Debtor 1 **Brooks** Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.22 The Cash Store \$250.00 Last 4 digits of account number _ Nonpriority Creditor's Name 1701 N. Larkin Ave When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Crest Hill Illinois 60403 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify Payday Loan Is the claim subject to offset? **✓** No Yes 4.23 US DEPARTMENT OF EDU \$1.00 Last 4 digits of account number Nonpriority Creditor's Name 101 MARIÉTTA TOWER, SUITE When was the debt incurred? n/a Street Number As of the date you file, the claim is: Check all that apply. Contingent ATLANTA Georgia 30323 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify **✓** No

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 32 of 74

	ra		Brooks		number (if known)
First Na	ame	Middle Name	Last Name		
3: List (Others to Be Noti	fied About a Debt	That You Already	Listed	
					ou already listed in Parts 1 or 2. For example, if a
	0 , , 0	•	•	•	riginal creditor in Parts 1 or 2, then list the collection
	· · ·		•	•	I in Parts 1 or 2, list the additional creditors here. If
you do no	t have additional per	sons to be notified fo	r any debts in Parts 1	or 2, do not fill or	ut or submit this page.
•					
	•		•		
Harris & F	Harris LTD		·		
Harris & F	- Harris LTD		On which ent	ry in Part 1 or Part	t 2 did you list the original creditor?
Name				•	
Name	Harris LTD Jackson Boulevard Suite	∋ 400	On which ent	of (Check	
Name		e 400		•	Part 1: Creditors with Priority Unsecured Claims
Name 111 West J	Jackson Boulevard Suite	∋ 400		of (Check	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Name 111 West J Number	Jackson Boulevard Suite	∋ 400		of (Check	Part 1: Creditors with Priority Unsecured Claims
Name 111 West J	Jackson Boulevard Suite	e 400 60604	Line 4.8	of (Check	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 33 of 74

Shatara **Brooks** Debtor 1 Case number (if known) First Name Middle Name Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6b \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$1.00 **Total claims** 6f. Student loans from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. debts \$20,671.68 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$20,672.68 6j. Total. Add lines 6f through 6i. 6j.

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 34 of 74

Fill in this infor	mation to identify your cas	se:		
Debtor 1	Shatara		Brooks	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing	ng) First Name	Middle Name	Last Name	_
United States	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number (If known)				
	Form 106G		s and Unexpire	Check if this is a amended filing
Be as complet	te and accurate as poss	ible. If two married people	e are filing together, both are	re equally responsible for supplying correct information. If more his page. On the top of any additional pages, write your name
•	ber (if known).		,	
1. Do you l	have any executory	contracts or unexpi	red leases?	
✓ No. Ch	neck this box and file this fo	orm with the court with your o	other schedules. You have noth	thing else to report on this form.
Yes. Fi	III in all of the information b	elow even if the contracts o	r leases are listed on Schedule	lle A/B: Property (Official Form 106A/B).
				nen state what each contract or lease is for (for example, rent,

State what the contract or lease is for

Person or company with whom you have the contract or lease

Official Form 106G

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 35 of 74

Fill	in this inforr	nation to identify your cas	e:		
De	btor 1	Shatara		Brooks	
		First Name	Middle Name	Last Name	
	btor 2	7) =:			
(Sp	ouse, ii iiiiii	g) First Name	Middle Name	Last Name	
Un	ted States E	Bankruptcy Court for the:	Northern	District of Illinois	
Ca	se number			(State)	
	nown)				—
					Check if this is an
					amended filing
<u>Ot</u>	ficial l	Form 106H			
Sc	hedul	e H: Your Co	odebtors		12/15
					plete and accurate as possible. If two married people are filing
	No Yes Within the Idaho, Loui No. G Yes. I	e last 8 years, have you siana, Nevada, New Mex Go to line 3. Did your spouse, former s No	lived in a community propico, Puerto Rico, Texas, War	shington, and Wisconsin.) ve with you at the time?	ebtor.) mmunity property states and territories include Arizona, California, the name and current address of that person.
		Name of your spouse, for	ormer spouse, or legal equiv	/alent	_
		Number Street			_
		City	State	Zip Code	_
3.	again as a	codebtor only if that p	erson is a guarantor or co	osigner. Make sure you have	ur spouse is filing with you. List the person shown in line 2 e listed the creditor on <i>Schedule D</i> (Official Form 106D), e <i>D</i> , <i>Schedule E/F</i> , or <i>Schedule G</i> to fill out Column 2.
	Column 1	: Your codebtor			Column 2: The creditor to whom you owe the debt

Official Form 106H Schedule H: Your Codebtors page 1

Check all schedules that apply:

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 36 of 74

		200	ominom ra	go oo oo o	
Fill in th	is information to identif	y your case:			
Debtor 1	Shatara		Brooks		
DODIOI 1	First Name	Middle Name	Last Name		
Debtor 2					Check if this is:
(Spouse, i	f filing) First Name	Middle Name	Last Name		An amended filing
United Sta	ates Bankruptcy Court for the:	Northern	District of Illinois (State)		A supplement showing post-petition chapter 1st expenses as of the following date:
Case num	nber		(=10.10)		
(If known)					MM / DD / YYYY
Officia	al Form 106l				
Sche	dule I: Your Inc	come			12/1:
	al pages, write your na		r (if known). An	swer every question	i.
1.	Fill in your employment information.		Debtor 1		Debtor 2
		Employment status	✓ Employed		✓ Employed
	If you have more than one job,		Not Employe	ed	Not Employed
	attach a separate page with information about additional	Occupation	Self-employment	<u>:</u>	Self-employment
	employers.	Employer's name			
	Include part time, seasonal, or self-employed work.	Employer's address	Number Street		Number Street
	Occupation may include				
	student or homemaker, if it applies.				
	or nomemaker, it it applies.		City	State Zip Code	City State Zip Code
		How long employed there?			
Estimate you are s	separated.	date you file this form. If y		all employers for that person	the space. Include your non-filing spouse unless on on the lines below. If you need more space,
2. Lis t	t monthly gross wages, sala	ry, and commissions (befo	re all payroll 2.	For Debtor 1	non-filing spouse
	luctions.) If not paid monthly, ca			ψ0.00	
3. Est	imate and list monthly over	time pay.	3.	+ \$0.00	+ \$0.00

\$0.00

\$0.00

4. Calculate gross income. Add line 2 + line 3.

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 37 of 74

Debtor 1 Shatara	Brooks	Case number	(if known)	
First Name Middle Name	Last Name	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here →	4.	\$0.00	\$0.00	
5. List all payroll deductions:				
5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00	\$0.00	
5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00	
5c. Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00	
5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00	
5e. Insurance	5e.	\$0.00	\$0.00	
5f. Domestic support obligations	5f.	\$0.00	\$0.00	
5g. Union dues	5g.	\$0.00	\$0.00	
5h. Other deductions. Specify:		\$0.00 +		
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5	· -	\$0.00	\$0.00	
+5h.	11 + 59 6	\$0.00	\$0.00	
7. Calculate total monthly take-home pay. Subtract line 6 from line	e 4. 7. <u> </u>	\$0.00	\$0.00	
8. List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing groups.	oss			
receipts, ordinary and necessary business expenses, and the to monthly net income.		\$1,600.00	\$2,400.00	
8b. Interest and dividends	8b	\$0.00	\$0.00	
8c. Family support payments that you, a non-filing spouse, of dependent regularly receive	or a			
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c	\$0.00	\$0.00	
8d. Unemployment compensation	8d	\$0.00	\$0.00	
8e. Social Security	8e	\$0.00	\$0.00	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cas assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies	ih er			
Specify: Food Assistance Programs Income	8f	\$500.00	\$0.00	
8g. Pension or retirement income	8g	\$0.00	\$0.00	
8h. Other monthly income. Specify:	<u> </u>	\$0.00 +		
9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g -	+ 8h. 9	\$2,100.00	\$2,400.00	
10.Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing sp	pouse 10.	\$2,100.00 +	\$2,400.00	= \$4,500.00
11. State all other regular contributions to the expenses that yo Include contributions from an unmarried partner, members of your relatives. Do not include any amounts already included in lines 2-10 or amounts.	household, your deper	ndents, your roommates		
Specify:				11. + \$0.00
12. Add the amount in the last column of line 10 to the amount Write that amount on the Summary of Schedules and Statistical Su				12. \$4,500.00
•				Combined monthly income
13. Do you expect an increase or decrease within the year after y	ou file this form?			onany moonie
Yes. Explain:				

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 38 of 74

Fill in this infor	mation to identify your ca	ase:				
Debtor 1	Shatara		Brooks			
Debior	First Name	Middle Name	Last Name			
Debtor 2				Check if this is:		
(Spouse, if filin	g) First Name	Middle Name	Last Name	An amended filing	g	
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	A supplement she expenses as of the	owing post-petition ch	napter 13
Case number (If known)	-					
,				MM / DD / YYYY	,	
Official	Form 106J					
Schadu	le J: Your E	vnansas				12/15
information. If (if known). Ans Part 1: Des	more space is needed swer every question. cribe Your House	I, attach another sheet to this	e filing together, both are equally form. On the top of any additiona			er
1. Is this a join	nt case?					
✓ No. Go	to line 2					
Yes. D	oes Debtor 2 live in a	separate household?				
[No					
Г	Yes. Debtor 2 must f	file Official Forms 106J-2. Expen	ses for Separate Household of Debt	or 2.		
2. Do you hav	/e 🔲	No				
dependents?		A = = 11				
Do not list D Debtor 2.		Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent with you?	(live
			Child	2 years	No.	
					✓ Yes.	
	proposition	No				
yourself an dependent	d your \square	Yes				
Part 2: Esti	mate Your Ongoin	g Monthly Expenses				
_	of a date after the ban		you are using this form as a supp plemental Schedule J, check the	•	•	
		-cash government assistance I it on Schedule I: Your Income			Your e	xpenses
	or home ownership ex or the ground or lot. 4.	xpenses for your residence. In	clude first mortgage payments and		4.	\$1,200.00
If not incl	luded in line 4:					
4a. Real e	state taxes				4a	\$0.00
4b. Proper	rty, homeowner's, or ren	ter's insurance			4b	\$0.00
4c. Home	maintenance, repair, and	d upkeep expenses			4c.	\$0.00
4d. Home	owner's association or co	ondominium dues			4d.	\$0.00

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 39 of 74

Brooks

Debtor 1

Shatara Case number (if known) First Name Middle Name Last Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$150.00 6a. 6b. Water, sewer, garbage collection \$50.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$75.00 6c. 6d. Other. Specify: Family Cell Phone Bill \$260.00 6d 7. Food and housekeeping supplies \$500.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$150.00 10. Personal care products and services 10. \$150.00 11. Medical and dental expenses \$50.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$450.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$323.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: Spouse's Monthly Car Payment \$567.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 40 of 74

Debtor 1	Shatara		Brooks	Case number (if known)		
	First Name	Middle Name	Last Name			
21.Other	. Specify:				21	\$0.00
22 Color	ılate your monthly ex	noncoo				
		penses.				\$3,925.00
	Add lines 4 through 21.					\$0.00
	. ,	xpenses for Debtor 2), if any, fro				\$3,925.00
22c. A	add line 22a and 22b. Th	he result is your monthly expens	ses.		22.	
23.Calcu	late your monthly net	t income.				
23a. C	Copy line 12 (your comb	pined monthly income) from Sch	edule I.		23a	\$4,500.00
23b. C	Copy your monthly expe	nses from line 22 above.			23b	\$3,925.00
23c. S	Subtract your monthly ex	penses from your monthly incor	me.			\$575.00
	The result is your month	hly net income.			23c	
24. Do yo	ou expect an increase	e or decrease in your expense	es within the year after you	i file this form?		
		to finish paying for your car loar				
mort	gage payment to increa	ase or decrease because of a m	nodification to the terms of yo	ur mortgage?		
1	No					
	/es					
	Explain here:					
	ZAPIGIIT HOTO:					

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 41 of 74

Fill in this information to identify your case:							
Debtor 1	Shatara		Brooks				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filin	g) First Name	Middle Name	Last Name				
United States	Bankruptcy Court for the:	Northern	District of Illinois				
Case number (If known)			(State)				

Official Form 106Dec

Check if this is an
amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t1: Sign Below								
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?								
	☑ No								
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).							
	Under penalty of perjury, I declare that I have read the summary at that they are true and correct.	nd schedules filed with this declaration and							
	that they are true and correct.								
X	/s/ Shatara Brooks	x							
	Signature of Debtor 1	Signature of Debtor 2							
	Date 9/23/2016	Date							
	MM/DD/YYYY	MM/DD/YYYY							

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 42 of 74

ebtor 1	rmation to identify your o	occo.					
htor 1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	case.			1		
יטוטו ו	Shatara		Brooks				
	First Name	Middle	Name Last Nam	ne			
ebtor 2 pouse, if filir	ng) First Name	Middle	Name Last Nam	ne			
	Dead was to Occupt for the	Nigothaga	District of III's a	•_			
lited States	Bankruptcy Court for the	e: <u>Northern</u>	District of Illino (Stat	_			
ase number			(Otal				
known)							_
fficial	Form 107						Check if this amended filin
:ateme	ent of Finan	cial Affair	s for Individua	als Filing	for Ba	ankruptcy	/
as comple	te and accurate as po	ssible. If two marrie	ed people are filing togeth	er, both are equa	Ily responsi	ble for supplying	correct information. If n
	ed, attach a separate s	sheet to this form.	On the top of any additiona	al pages, write yo	ur name and	d case number (if	known). Answer every
estion.							
rt 1: Giv	e Details About Yo	our Marital Stat	us and Where You Liv	ed Before			
What is	s your current marital	status?					
✓ Ma	arried						
	ot married						
_							
During	the last 3 years, have	you lived anywhere	e other than where you live	now?			
☐ No)						
✓ Ye:	s. List all of the places ye	ou lived in the last 3 y	ears. Do not include where y	ou live now.			
De	ebtor 1		Dates Debtor 1 lived	Debtor 2:			Dates Debtor 2 lived
De	ebtor 1:		Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
De	ebtor 1:						there
De	ebtor 1:			Debtor 2:	Debtor 1		
	ebtor 1: 75 E. Cedar Street		there		Debtor 1		there Same as Debtor 1
<u>177</u>							there
<u>177</u>	75 E. Cedar Street		there	Same as E			there Same as Debtor 1
177 Nu	75 E. Cedar Street	60901	there From <u>02/01/2015</u>	Same as E			there Same as Debtor 1 From
177 Nu	75 E. Cedar Street Imber Street Illinois	60901 Zip Code	there From <u>02/01/2015</u>	Same as E		Zip Code	there Same as Debtor 1 From
177 Nu ——————————————————————————————————	75 E. Cedar Street Imber Street Illinois		there From <u>02/01/2015</u>	Same as D	t State	Zip Code	there Same as Debtor 1 From
177 Nu <u>Ka</u> Cit	75 E. Cedar Street Imber Street Illinois y State		there From <u>02/01/2015</u>	Same as Description Street City	t State	Zip Code	there Same as Debtor 1 From To
177 Nu <u>Ka</u> Cit	75 E. Cedar Street Imber Street Illinois y State		there From <u>02/01/2015</u>	Same as D Number Street City Same as D	State Debtor 1	Zip Code	there Same as Debtor 1 From To
177 Nu <u>Ka</u> Cit	75 E. Cedar Street Imber Street Illinois y State		From <u>02/01/2015</u> To <u>07/01/2016</u>	Same as Description Street City	State Debtor 1	Zip Code	there Same as Debtor 1 From To Same as Debtor 1
177 Nu Kai Cit	75 E. Cedar Street Imber Street Illinois y State 16 Chaffee Road Imber Street	Zip Code	From 02/01/2015 To 07/01/2016 From 12/01/2013	Same as D Number Street City Same as D	State Debtor 1	Zip Code	there Same as Debtor 1 From To Same as Debtor 1 From
177 Nu Kar Cit	75 E. Cedar Street Imber Street Illinois y State 16 Chaffee Road Imber Street Is Moines lowa	Zip Code	From 02/01/2015 To 07/01/2016 From 12/01/2013	Same as D Number Street City Same as D Number Street	State Debtor 1		there Same as Debtor 1 From To Same as Debtor 1 From
177 Nu Kai Cit	75 E. Cedar Street Imber Street Illinois State 16 Chaffee Road Imber Street 28 Moines lowa	Zip Code	From 02/01/2015 To 07/01/2016 From 12/01/2013	Same as D Number Street City Same as D	State Debtor 1	Zip Code	there Same as Debtor 1 From To Same as Debtor 1 From From
177 Nu Kar Cit 65 Nu De Cit	75 E. Cedar Street Imber Street Illinois Ty State 16 Chaffee Road Imber Street 28 Moines lowa Ty State 29 State 20 Indicate the state of the sta	Zip Code 50301 Zip Code	From 02/01/2015 To 07/01/2016 From 12/01/2013 To 02/01/2015 Douse or legal equivalent in	Same as D Number Street City Same as D Number Street City City a community pr	State Debtor 1 t State	Zip Code	there Same as Debtor 1 From To Same as Debtor 1 From To
177 Nu Kar Cit 65 Nu De Cit	75 E. Cedar Street Imber Street Illinois Ty State 16 Chaffee Road Imber Street 28 Moines lowa Ty State 29 State 20 Indicate the state of the sta	Zip Code 50301 Zip Code	From <u>02/01/2015</u> To <u>07/01/2016</u> From <u>12/01/2013</u> To <u>02/01/2015</u>	Same as D Number Street City Same as D Number Street City City a community pr	State Debtor 1 t State	Zip Code	there Same as Debtor 1 From To Same as Debtor 1 From To To To

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 43 of 74

Debt	tor 1		Brooks		umber (if known)	
			Name Last Na	me		
Part	2:	Explain the Sources of Your	Income			
	Fill i	you have any income from employm in the total amount of income you receive vities. If you are filing a joint case and you No Yes. Fill in the details.	ed from all jobs and all busine	esses, including part-time		ears?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		rom January 1 of current year until ne date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$12800.00	Wages, commissions, bonuses, tips Operating a business	
		or last calendar year: lanuary 1 to December 31, 2015	Wages, commissions, bonuses, tips Operating a business	\$10000.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business	
		or the calendar year before that: lanuary 1 to December 31, 2014	Wages, commissions, bonuses, tips Operating a business	\$8000.00	Wages, commissions, bonuses, tips Operating a business	
l k	Inclui bene case List e	you receive any other income during de income regardless of whether that income fit payments; pensions; rental income; in and you have income that you received each source and the gross income from No Yes. Fill in the details.	come is taxable. Examples of nterest; dividends; money coll together, list it only once unde	other income are alimony; chected from lawsuits; royalties er Debtor 1.	; and gambling and lottery winr	
•			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
		From January 1 of current year until he date you filed for bankruptcy:	Est. YTD LINK	\$4,000.00		
		For last calendar year: January 1 to December 31, 2015) YYYY	Est. LINK	\$6,000.00		
		For the calendar year before that: January 1 to December 31, 2014 YYYYY	Est. LINK	\$6,132.00		

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 44 of 74

1 Shatara First Name		Middle Name	Last Name	Case num	nber (if known)	
	tain Daymer		Before You Filed for	Rankruntov		
List Cer	taiii Fayiilei	its fou Made E	serore rou Fileu for	Банкгирісу		
e either Deb	tor 1's or Debte	or 2's debts prima	rily consumer debts?			
No. Neith	er Debtor 1 no	Debtor 2 has pri	marily consumer debts.	Consumer debts are defined	d in 11 U.S.C. § 101(8) as "inc	urred by an individual
		al, family, or househ			J (,	·
During	g the 90 days be	fore you filed for bar	nkruptcy, did you pay any cr	reditor a total of \$6,425* or m	nore?	
П	lo. Go to line 7.					
		each creditor to who	m vou paid a total of \$6.425	* or more in one or more pa	vments and the	
	total amour	nt you paid that cred	itor. Do not include paymer	nts for domestic support obli o an attorney for this bankru	gations, such as	
* Subj	ect to adjustmen	t on 4/01/19 and ev	ery 3 years after that for ca	ses filed on or after the date	of adjustment.	
_	•		marily consumer debts.		-	
-		-		raditar a total of PCOO as	~?	
		iore you liled for bal	ikiupicy, did you pay any cr	editor a total of \$600 or mor	U !	
	lo. Go to line 7.					
□ Y	es. List below e	ach creditor to who	m you paid a total of \$600 c	or more and the total amount	you paid	
			yments for domestic suppo lyments to an attorney for th	ort obligations, such as child	support and	
	ammony. 7 do	o, do not moidae pe	tymonio to an attornoy for the	iio bariitapioy case.		
			Dates of payment	Total amount paid	Amount you still owe	Was this payment
						for
Creditor's	Name					☐ Mortgage ☐ Car
Number S	treet					Credit card
-						Loan repaymer
0''	2: :					Suppliers or
City	State	Zip Code				vendors
						Other
Creditor's	Name					☐ Mortgage ☐ Car
Number S	treet					Credit card
						Loan repaymer
						Suppliers or
City	State	Zip Code				vendors
						Other
Creditor's	Name					Mortgage
Ni wala a a O	troot					Car
Number S	treet					Credit card
						Loan repaymer Suppliers or
City	State	Zip Code				Suppliers or vendors
						Other

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 45 of 74

Debtor 1	Shatara			Br	ooks	Case number ((if known)
	First Name		Middle Name		st Name		
Insi cor age	iders include your re porations of which y	elatives; an you are an our or a busines	y general partners; officer, director, per s you operate as a	relatives of any son in control, or	r owner of 20% or mo	nerships of which y re of their voting se	ho was an insider? /ou are a general partner; curities; and any managing pmestic support obligations,
<u> </u>	No		:				
	Yes. List all paym	ents to an Ir	isiaer.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
insi	chin 1 year before ider? ude payments on de	-			payments or trans	fer any property o	n account of a debt that benefited an
	No Yes. List all payme	ents that bei	nefited an insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
							indude deditors name
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name				·		
	Number Street						
	City	State	Zip Code				

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 46 of 74

Эeb	tor 1	Shatara			rooks	c	Case number (if i	known)	
		First Name	Middle Name	La	ast Name				
art	4:	Identify Legal	Actions, Repossessi	ons, and Fo	reclosure	es			
	With	nin 1 year before yo	ou filed for bankruptcy, we	ere you a party	in any laws	uit, court actio			
		all such matters, incl ract disputes.	uding personal injury cases	, small claims ac	ctions, divorc	es, collection su	uits, paternity a	ctions, support or	custody modifications, and
		No							
	Ш	Yes. Fill in the detai							
				Nature of the c	ase	Court or a	agency		Status of the case
		Case title							Pending
						Court Nan	ne		On appeal
		Case number				NumberSt	root		Concluded
						Numbersi	i cc i		_
						City	State	Zip Code	
		Case title							Pending
		-				Court Nan	ne		On appeal
		Case number				NumberSt	root		Concluded
						Numbersi	ieet		_
						0:1	01-1-	7: 0: 1:	
						City	State	Zip Code	
	✓	Yes. Fill in the info	mation below.	Descri	be the prop	erty		Date	Value of the property
		Honor Finance		2007 Le	exus ES 350			04/29/201	
		Creditor's Name							
		PO Box 1817		Explain	n what happ	ened			
		Number Street		_					
				✓ Pro	operty was re	epossessed.			
		-			operty was fo				
		Evanston	Illinois 60204		operty was g				
		City	State Zip Code	Pro	operty was a	ttached, seized,	or levied.		
				Descri	be the prop	erty		Date	Value of the property
		Creditor's Name							
				Explain	n what happ	pened			
		Number Street							
				Pro	operty was re	epossessed.			
		-			operty was fo				
					operty was g				
		City	State Zip Code	Pro	operty was a	ttached, seized.	or levied.		

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 47 of 74

Deb	tor 1	Shatara	Middle Name	Brooks	Case number (if known)		
		First Name	Middle Name	Last Name			
11.		hin 90 days before you filed foounts or refuse to make a pay			ank or financial institution, s	et off any amou	nts from your
	✓	No Yes. Fill in the details.					
				Describe the action the	e creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street					
				Last 4 digits of account n	umber: XXXX-		
		City State	Zip Code				
12.		hin 1 year before you filed for ointed receiver, a custodian,		of your property in the p	oossession of an assignee f	or the benefit of	creditors, a court-
	V	No					
		Yes					
Part	5:	List Certain Gifts and C	Contributions				
13.	Wi	ithin 2 years before you filed f	or bankruntev did ve	u give any gifts with a to	atal value of more than \$600	ner nerson?	
10.		•	or barikruptcy, did ye	a give any gins with a te	rtal value of more than 4000	per person:	
	✓	No Yes. Fill in the details for each	aift.				
		Gifts with a total value of me per person		Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave the	Gift				
		Number Street					
		City State	Zip Code				
		Person's relationship to you					
		Person to Whom You Gave the	Gift				
		Number Street					
			7:- 0 - 1-				
		City State	Zip Code				
		Person's relationship to you					

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 48 of 74

Deb	tor 1	Shatara	Brooks	Case number (if known)	
		First Name Middle Name	Last Name		
14.	Wit	hin 2 years before you filed for bankruptcy, d	lid you give any gifts or contribution	ns with a total value of more th	an \$600 to any charity?
	~	No			
	Ħ	Yes. Fill in the details for each gift or contribution	on.		
		Gifts or contributions to charities	Describe what you contribut	ed Date y	ou Value
		that total more than \$600		contri	
		Charity's Name			
		Number Street			
		City Chata Zin Coda			
		City State Zip Code			
Part	6:	List Certain Losses			
15.		nin 1 year before you filed for bankruptcy or	since you filed for bankruptcy, did y	ou lose anything because of the	neft, fire, other disaster, or
	gan	ıbling?			
	빌	No			
	Ш	Yes. Fill in the details.			
		Describe the property you lost and how the loss occurred	Describe any insurance cover	_	of your Value of property
		now the loss occurred	Include the amount that insurar pending insurance claims on lir		lost
			A/B: Property.		
		List Certain Payments or Transfers			
		ut seeking bankruptcy or preparing a bankru de any attorneys, bankruptcy petition preparers, No Yes. Fill in the details.		ces required in your bankruptcy.	
			Description and value of any transferred	property Date p or tran was m	
		Torres, Jaime	Attorney's Fee - 350.00	9/23/20	
		Person Who Was Paid			
		Number Charat			
		Number Street			
		City State Zip Code			
		Email or website address	_		
		Person Who Made the Payment, if Not You			
		Person Who Was Paid	_		
		Number Street	_		
		Training Officer	_		
			_		
		City State Zip Code			
		Email or website address	_		
		Person Who Made the Payment, if Not You	_		

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 49 of 74

Deb	tor 1	Shatara		Brooks	Case number (if known)	
		First Name	Middle Name	Last Name			
17.	help	hin 1 year before you filed by you deal with your credito not include any payment or tra No Yes. Fill in the details.	ors or to make payment	s to your creditors?	your behalf pay or transfer	any property to any	one who promised to
	ш	res. I ili ili tre details.					
				Description and value of transferred	f any property		Amount of payment
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
		City State	Zip Code				
		ude both outright transfers an sfers that you have already lis No Yes. Fill in the details.					
				Description and value o property transferred		ny property or eceived or debts pai e	Date transfer was made
		Person Who Received Trans	nsfer				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person Who Received Tran	nsfer				
		Number Street					
		City State Person's relationship to you	Zip Code				
19.		hin 10 years before you file ese are often called asset-pro		ou transfer any property to	a self-settled trust or sim	ilar device of which y	ou are a beneficiary?
		No Yes. Fill in the details.					
	Ц	103. I III III UIC UCIAIIS.		Description and value	of the property transferre	d	Date transfer was made
		Name of trust					

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 50 of 74

	Shatara First Name		Middle Name	Brooks Last Name	Case number (if known)		
-10		Timomoial A			Davas and Ctarana Unita		
rt 8:	List Certain i	-inanciai A	ccounts, ins	struments, Safe Deposit	Boxes, and Storage Units		
mo Incl	ved, or transferr	red? ings, money m	narket, or other fir	nancial accounts; certificates of de	eposit; shares in banks, credit union		
	No	,					
✓	Yes. Fill in the de	etails.					
				Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last baland before closing or transfer
	Wells Fargo			- XXXX-2289	✓ Checking	09/22/2016	\$ 0.00
	Person Who Wa				Savings	03/22/2010	Ψ 0.00
	1440 Old Salem Number Street	Rd Se		_	Money market		
	- Street			_	Brokerage		
	Conyers	Georgia	30013		Other		
	City	State	Zip Code	-			
				- XXXX-	Checking		
	Person Who Wa	is Paid			Savings		
	Number Street			_	Money market		
					Brokerage		
				-	Other		
	City	State	Zip Code	_			
0th		r did you nav	e within 1 year	before you filed for bankruptcy	, any safe deposit box or other o	depository for securi	ities, cash, or
oth	er valuables? No Yes. Fill in the de	-	e within 1 year	before you filed for bankruptcy Who else had access to it?	, any safe deposit box or other of		Do you stil
oth	er valuables? No Yes. Fill in the de	etails.	e within 1 year				
oth	er valuables? No Yes. Fill in the de	etails.	e within 1 year	Who else had access to it?			Do you still have it?
oth	er valuables? No Yes. Fill in the de	etails.	e within 1 year	Who else had access to it? Name Number Street	Describe the co		Do you still have it?
oth	er valuables? No Yes. Fill in the de	etails.	e within 1 year	Who else had access to it? Name Number Street			Do you still have it?
oth	er valuables? No Yes. Fill in the de	etails.	Zip Code	Who else had access to it? Name Number Street	Describe the co		Do you still have it?
∀ □	No Yes. Fill in the de Name of Finance Number Street City	etails. cial Institution State	Zip Code	Name Number Street City State	Describe the col	ntents	Do you stil have it?
∀ □	No Yes. Fill in the de Name of Finance Number Street City Ve you stored pro	etails. cial Institution State	Zip Code	Name Number Street City State	Describe the co	ntents	Do you stil have it?
∀	No Yes. Fill in the de Name of Finance Number Street City Ve you stored pro	etails. cial Institution State pperty in a sto	Zip Code	Name Number Street City State	Describe the col	ntents	Do you stil have it?
	No Yes. Fill in the de Name of Finance Number Street City Ve you stored pro	etails. cial Institution State pperty in a sto	Zip Code	Who else had access to it? Name Number Street City State ace other than your home with	Describe the condition of the condition	ntents	Do you still have it? No Yes
	No Yes. Fill in the de Name of Finance Number Street City Ve you stored pro	etails. cial Institution State pperty in a sto	Zip Code	Name Number Street City State	Describe the col	ntents	Do you still have it? No Yes
	No Yes. Fill in the de Name of Finance Number Street City Ve you stored pro No Yes. Fill in the de	cial Institution State pperty in a storetails.	Zip Code	Who else had access to it? Name Number Street City State ace other than your home with Who else had access to it?	Describe the condition of the condition	ntents	Do you still have it? No Yes
	No Yes. Fill in the de Name of Finance Number Street City Ve you stored pro No Yes. Fill in the de	cial Institution State pperty in a storetails.	Zip Code	Who else had access to it? Name Number Street City State ace other than your home with Who else had access to it? Name	Describe the condition of the condition	ntents	Do you still have it? No Yes Do you still have it?
	No Yes. Fill in the de Name of Finance Number Street City Ve you stored pro No Yes. Fill in the de	cial Institution State pperty in a storetails.	Zip Code	Who else had access to it? Name Number Street City State ace other than your home with Who else had access to it?	Describe the condition of the condition	ntents	Do you still have it? No Yes Do you still have it?
	No Yes. Fill in the de Name of Finance Number Street City Ve you stored pro No Yes. Fill in the de	cial Institution State pperty in a storetails.	Zip Code	Name Number Street City State Who else had access to it? Name Number Street	Describe the condition of the condition	ntents	Do you still have it? No Yes Do you still have it?
	No Yes. Fill in the de Name of Finance Number Street City Ve you stored pro No Yes. Fill in the de	cial Institution State pperty in a storetails.	Zip Code	Name Number Street City State Acce other than your home with Who else had access to it? Name Number Street	Describe the condition of the condition	ntents	Do you sti have it? No Yes Do you sti have it?

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 51 of 74

ebtor 1		Ві			e number (if known)			
	First Name Middle Name	La	ast Name					
ırt 9:	Identify Property You Hold or Cont	rol for Some	eone Else					
	you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for meone.							
_	-							
✓	No							
	Yes. Fill in the details.							
		Where is th	ne property?		Describe the contents	Value		
								
	Owner's Name	Number Stre	eet					
	Number Street							
		City	State	Zip Code				
		·		·				
	City State Zip Code							
art 10:	Give Details About Environmental	Information	1					
or the	purpose of Part 10, the following definitions apply	<i>[</i> :						
	Environmental law means any federal, state, or lo		· ·	•	•			
	hazardous or toxic substances, wastes, or materi	•						
	including statutes or regulations controlling the cl	leanup of these s	substances, v	astes, or materia	āl.			
	Site means any location, facility, or property as de	•	environmental	law, whether you	now own, operate, or utilize it			
	or used to own, operate, or utilize it, including dis	sposal sites.						
	Hazardous material means anything an environm	ental law defines	s as a hazardo	us waste, hazard	ous substance,			
•	Hazardous material means anything an environm toxic substance, hazardous material, pollutant, co			us waste, hazard	ous substance,			
•	toxic substance, hazardous material, pollutant, co	ontaminant, or sir	milar term.		ous substance,			
•		ontaminant, or sir	milar term.		ous substance,			
■ eport	toxic substance, hazardous material, pollutant, co	ontaminant, or sin	milar term. dless of when	they occurred.		,		
■ eport	toxic substance, hazardous material, pollutant, co	ontaminant, or sin	milar term. dless of when	they occurred.		,		
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo No	ontaminant, or sin	milar term. dless of when	they occurred.				
eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo	ontaminant, or sin	milar term. dless of when	they occurred.				
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo No	ontaminant, or sin	milar term. dless of when e or potential	they occurred.		Date of		
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo No	ontaminant, or sin	milar term. dless of when e or potential	they occurred.	or in violation of an environmental law?			
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo No Yes. Fill in the details.	ontaminant, or sin	milar term. dless of when e or potential	they occurred.	or in violation of an environmental law?	Date of		
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo No	ontaminant, or sin	milar term. dless of when e or potential	they occurred.	or in violation of an environmental law?	Date of		
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo No Yes. Fill in the details.	ontaminant, or sin	milar term. dless of when e or potential ntal unit	they occurred.	or in violation of an environmental law?	Date of		
■ eport	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have not	Governmenta Number Streen	milar term. dless of when e or potential ntal unit	they occurred.	or in violation of an environmental law?	Date of		
■ eport	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have not	Governments	milar term. dless of when e or potential ntal unit	they occurred.	or in violation of an environmental law?	Date of		
■ eport	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have any governmental unit notified you have any government	Governmenta Number Streen	milar term. dless of when e or potential ntal unit al unit	they occurred.	or in violation of an environmental law?	Date of		
■ eport	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have not	Governmenta Number Streen	milar term. dless of when e or potential ntal unit al unit	they occurred.	or in violation of an environmental law?	Date of		
eport. Ha	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have any governmental unit notified you have any government	Government Government Government City	milar term. dless of when e or potential ntal unit al unit eet State	they occurred. Iy liable under o	or in violation of an environmental law?	Date of		
eport. Ha	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have a likely of the second of the	Government Government Government City	milar term. dless of when e or potential ntal unit al unit eet State	they occurred. Iy liable under o	or in violation of an environmental law?	Date of		
eport. Ha	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have a substance of site. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any notified any governmenta	Government Government Government City	milar term. dless of when e or potential ntal unit al unit eet State	they occurred. Iy liable under o	or in violation of an environmental law?	Date of		
eport. Ha	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have a likely of the second of the	Government Government Number Stre City	milar term. dless of when e or potential ntal unit al unit eet State	they occurred. Iy liable under o	or in violation of an environmental law? Environmental law, if you know it	Date of notice		
eport. Ha	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have a substance of site. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any notified any governmenta	Government Government Government City	milar term. dless of when e or potential ntal unit al unit eet State	they occurred. Iy liable under o	or in violation of an environmental law?	Date of notice		
eport. Ha	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have a substance of site. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any notified any governmenta	Government Government Number Stre City	milar term. dless of when e or potential ntal unit al unit eet State	they occurred. Iy liable under o	or in violation of an environmental law? Environmental law, if you know it	Date of notice		
eport. Ha	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any yes. Fill in the details.	Government City Government Government City Government	milar term. dless of when e or potential ntal unit al unit set State zardous mate	they occurred. Iy liable under o	or in violation of an environmental law? Environmental law, if you know it	Date of notice		
eport. Ha	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have a substance of site. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any notified any governmenta	Government Government Number Stre City	milar term. dless of when e or potential ntal unit al unit set State zardous mate	they occurred. Iy liable under o	or in violation of an environmental law? Environmental law, if you know it	Date of notice		
eport. Ha	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any yes. Fill in the details.	Government City Government Government City Government	milar term. dless of when e or potential ntal unit al unit eet State zardous mate	they occurred. Iy liable under o	or in violation of an environmental law? Environmental law, if you know it	Date of notice		
eport. Ha	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any yes. Fill in the details. No Yes. Fill in the details.	Government Government City Government Government City Government	milar term. dless of when e or potential ntal unit al unit eet State zardous mate	they occurred. Iy liable under o	or in violation of an environmental law? Environmental law, if you know it	Date of notice		
eport . Ha	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any yes. Fill in the details. No Yes. Fill in the details.	Government Government City Government Government City Government	milar term. dless of when e or potential ntal unit al unit eet State zardous mate	they occurred. Iy liable under o	or in violation of an environmental law? Environmental law, if you know it	Date of notice		
eport. Ha	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any yes. Fill in the details. No Yes. Fill in the details.	Government Government City Government Government City Government Government City Government Government Government	milar term. dless of when e or potential ntal unit al unit set State zardous mate ntal unit	zip Code	or in violation of an environmental law? Environmental law, if you know it	Date of notice		

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 52 of 74

Deb	tor 1				Brooks	Case	e number (if known)	
		First Name		Middle Name	Last Name			
26.	Hav	e you been a party	/ in any judici	al or administra	tive proceeding under	any environment	al law? Include settlements and order	S.
	✓	No						
		Yes. Fill in the deta	ils.					
					Court or agency		Nature of the case	Status of the case
		Case title						Dan dia s
					Court Name			Pending
					Court Hamo			On appeal
		Case number			Number Street	_		Concluded
					City State	Zip Code		
		ı			•	·		
Part	t 11:	Give Details A	bout Your	Business or	Connections to An	ny Business		
27	\A/:41	in Avenue before	van filad fan l		vav avm a businasa ar	have any of the f	allawing connections to any business	. 2
27.	vviti	nin 4 years before	you filed for i	oankruptcy, ala	you own a business or	nave any of the f	ollowing connections to any business	5 ?
		A sole propriet	tor or self-empl	oyed in a trade, p	profession, or other activit	y, either full-time o	r part-time	
				-	or limited liability partners			
		A partner in a	-	,	,,	,		
				ing executive of a	a corporation			
			-	-	securities of a corporation	n		
	_	_			occumination of a comportant			
	$ ule{}$	No. None of the abo						
	Ш	Yes. Check all that	apply above ar	nd fill in the details	s below for each business			
					Describe the natu	re of the busines		
							include Social Security nu	ımber or ITIN.
		B No			_		EIN:	
		Business Name						
		Number Street			_		Dates business existed	
		Number Street			Name of account	ant or bookkeepe	er	
		City	State	Zin Codo	_		From To	
		City	Siale	Zip Code				
					Describe the natu	re of the busines		
							include Social Security nu	imper or IIIN.
		Business Name			_		EIN:	
		Dasiness Name						
		Number Street			_		Dates business existed	
					Name of account	ant or bookkeepe	er	
		City	State	Zip Code			From To	
		J.,						
								_
					Describe the natu	ire of the busines	Employer Identification n include Social Security no	
		Business Name			_		EIN:	
		Number Street			- Name (Dates business existed	
					Name of account	ant or bookkeepe		
		City	State	Zip Code			From To	<u></u>
		-		-				

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 53 of 74

Debte	or 1	Shatara			Brooks	Case number (if known)
		First Name		Middle Name	Last Name	
		nin 2 years befor litors, or other pa		bankruptcy, did yo	ou give a financial stateme	nt to anyone about your business? Include all financial institutions,
		No Yes. Fill in the det	ails below.			
					Date issued	
		Name			MM/DD/YYYY	
		Number Stree	t		_	
		City	State	Zip Code	_	
Part	12.	Sign Below				
I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.						y, or obtaining money or property by fraud in connection with a
		<u>/s</u>	Shatara Brook ature of Debtor			Signature of Debtor 2
		0.g				o.g
		Date	9/23/2016			Date 9/23/2016
0	Did y	ou attach additio	onal pages to '	our Statement of	Financial Affairs for Indivi	duals Filing for Bankruptcy (Official Form 107)?
Į.	7 N	lo				
Ī		es es				
0	Did y	ou pay or agree	to pay someor	e who is not an at	torney to help you fill out b	ankruptcy forms?
Ŀ	✓ N	lo				
] Y	es. Name of person	on			Attach the Bankruptcy Petition Preparer's Notice,

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
, <u> </u>	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A–2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 58 of 74

B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

		Northern District of	Illinois	
In re	Shatara Brooks ;		Case No.	
-	Debtor			(If known)
			Chapter	Chapter 13
	DISCLOSURE OF CO	MPENSATION O	F ATTORNEY FO	R DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. that compensation paid to me within one services rendered or to be rendered on is as follows:	e year before the filing of the	e petition in bankruptcy, or a	greed to be paid to me, for
	For legal services, I have agreed to acc	ept		\$4,000.00
	Prior to the filing of this statement I have	ve received		\$350.00
	Balance Due			\$3,650.00
2.	The source of the compensation paid to	me was:		
	✓ Debtor	Other (specify)		
3.	The source of the compensation paid to	me is:		
	✓ Debtor	Other (specify)		
4.	I have not agreed to share the above members and associates of my law		with any other person unless	they are
	I have agreed to share the above-dimembers or associates of my law fithe people sharing in the compensation.	irm. A copy of the agreeme		
5.	In return for the above-disclosed fee, I had a. Analysis of the debtor's financial bankruptcy;	-	The state of the s	
	b. Preparation and filing of any peti	tion, schedules, statements	of affairs and plan which ma	ay be required;
	c. Representation of the debtor at the	he meeting of creditors and	confirmation hearing, and ar	ny adjourned hearings thereof;
	d. Representation of the debtor in a	adversary proceedings and o	other contested bankruptcy r	matters;
6.	By agreement with the debtor(s), the ab-	ove-disclosed fee does not	include the following service	s:
		CERTIFICATION	N	
	I certify that the foregoing is a complete sine debtor(s) in this bankruptcy proceeding		t or arrangement for paymer	nt to me for representation
	9/23/2016		/s/ Jaime Torres	
	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	·

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 59 of 74

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Brooks, Shatara;	Case No		
	Debtor(s)	Chapter.	Chapter13	
	VERIFICATION	ON OF CREDITOR MAT	RIX	
	The above named Debtors hereby verify that the	e attached list of creditors is tru	e and correct to the best of their know	wledge.
Date:	9/23/2016	/s/ Brooks, Shat	ara	
		Brooks, Shatara Signature of De		
		/s/		
		Signature of Joi	nt Debtor	

Santander Consumer USA ATT POC: Janiscia Jackson PO Box 961245 Fort Worth , TX 76161 USA

Honor Finance PO Box 1817 Evanston , IL 60204 USA

CENTRAL CREDIT SERVICE Po Box 15118 Jacksonville , FL 32239 USA

DIVERSIFIED CONSULTANT 10550 DEERWOOD PARK BLVD JACKSONVILLE , FL 32256 USA

I C SYSTEM INC 444 Hwy 96 E Saint Paul , MN 55127 USA

Midamerican Energy 106 E 2nd St # 715B Davenport , IA 52801 USA

Comcast 11621 E. Marginal Way # 5 Bankruptcy Dept Seattle , WA 98168 USA

City of Chicago Parking 121 N. LaSalle St # 107A Chicago , IL 60602 USA

Harris & Harris LTD 111 West Jackson Boulevard Suite 400 Chicago , IL 60604 USA

The Cash Store 1701 N. Larkin Ave Crest Hill , IL 60403 USA

First Loan Financial 6421 W North Ave Oak Park , IL 60302 USA

TCF 500 Joliet Rd. Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 61 of 74

Willowbrook , IL 60527 USA ASSOCIATED BANK 200 N ADAMS ST GREEN BAY , WI 54301 USA

Creditors Collection Bureau, Inc. PO Box 63 Kankakee , IL 60901 USA

Domino's Pizza 30 Frank Lloyd Wright Dr Ann Arbor , MI 48105 USA

Gundersen Clinic LTD PO Box 2288 La Crosse , WI 54602 USA

Bronston Chiropractic Clinics PO Box 2288 La Crosse , WI 54602 USA

American InforSource LP as agent for Midland Funding LLC c/o Lovette Walls PO Box 268941 Oklahoma City , OK 73126 USA

Cottonwood Financial Illinois, LLC 1901 Gateway Dr., Suite 200 Irving , TX 75038 USA

AFNI, INC. 404 Brock Drive PO Box 3427 Bloomington , IL 61702 USA

Blackhawk Auto Finance 2340 S River Rd Des Plaines , IL 60018 USA

OAC Collections Specialists PO Box 500 Baraboo , WI 53913 USA

ACCOUNT LIQUIDATION SE 304 W WATER ST DECORAH, IA 52101 USA

Presence Saints Mary 2233 W Division St Chicago , IL 60622 Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 63 of 74

USA

US DEPARTMENT OF EDU 101 MARIETTA TOWER, SUITE ATLANTA , GA 30323 USA

Rehabilitation Services 100 W. Randolph Street Chicago , IL 60601 USA

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 66 of 74

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 67 of 74

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 69 of 74

- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$61.76 for expenses, leaving a balance due of \$4,021.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Debtor(s)		Attorney for Debto	r(s)
			/s/ Amy Gerstein	X
/s/ Shata	ara Brooks	malana i shooko		W/
Signed:		Water Dia W		
Date:	9/23/2016			

Do not sign if the fee amounts at top of this page are blank.

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 70 of 74

First Name	Middle Name	Last Name			
Part 6: Answer These Q	uestions for Reporting Purpo				
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be	No. Go to line 16b. ✓ Yes. Go to line 17. 16b. Are your debts primari obtain money for a busin investment. No. Go to line 16c. ✓ Yes. Go to line 17. 16c. State the type of debts y ✓ No. I am not filing under Chapter 7. paid that funds will be available.	in individual primarily for a particle ily business debts? Busines debts?	ersonal, family, ess debts are del gh the operation her debts or bus	or household purpose." ots that you incurred to of the business or iness debts.	
available for distribution to					
unsecured creditors?	?				
40 11	✓ 1-49	1,000-5,000	* "	25,001-50,000	
18. How many creditors do you estimate that	50-99	5,001-10,000	Aurorite Control of Co	50,001-100,000	
you owe?	100-199	10,001-25,000	(1000)	More than 100,000	
NOTION OF THE CONTRACT OF THE PROPERTY WAS ASSOCIATED AS THE CONTRACT OF THE C	200-999				
19. How much do you	\$0-\$50,000	\$1,000,001-\$10 mi	lion []	\$500,000,001-\$1 billion	
estimate your assets	\$50,001-\$100,000	\$10,000,001-\$50 m	Annual Control of the	\$1,000,000,001-\$10 billion	
to be worth?	\$100,001-\$500,000 \$500,001-\$1 million	\$50,000,001-\$100	***************************************	\$10,000,000,001-\$50 billion	
	Benefities A.	\$100,000,001-\$500	Nonconte	More than \$50 billion	
20. How much do you	\$0-\$50,000	\$1,000,001-\$10 mil		\$500,000,001-\$1 billion	
estimate your liabilities to be?	✓ \$50,001-\$100,000 ☐ \$100,001-\$500,000	\$10,000,001-\$50 m		\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion	
nabilities to be!	\$500,001-\$1 million	\$100,000,001-\$500	Amazuna	More than \$50 billion	
Part 7: Sign Below	Bosseed	Successed	house		
For you	I have examined this petition,	and I declare under penalty	of perjury that t	he information provided is true	
1 or you	and correct.			·	
	If I have chosen to file under 0 11,12, or 13 of title 11, United choose to proceed under Chap	States Code. I understand t	• •	• •	
	If no attorney represents me a me fill out this document, I have				
	I request relief in accordance	with the chapter of title 11, U	Inited States Co	de, specified in this petition.	
	I understand making a false statement, concealing property, or obtaining money or property by fraud in				
	connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
	1	1 1/2			
	/s/ Shatara Brooks \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	TOTO 12/00/10 X			
	Signature of Debtor 1		Signature of Debtor	2	
	Executed on 9/23/2016 MM / DD	/YYYY	Executed on	MM / DD / YYYY	

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 71 of 74

Fill in this into	ormation to identify your ca	se:			
Debtor 1	Shatara		Brooks		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if fil	^{ing)} First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	Northern	District of Illinois		
Case number	r		(State)		
(If known)	<u> </u>				
Official	Form 106De	€C		Check if this amended fili	
Declara	ation About a	n Individual De	btor's Sched	ules	12/1
f two married	people are filing togeth	er, both are equally responsi	ble for supplying correct	t information	
de transfer de la companya de la co	n Below pay or agree to pay som	eone who is NOT an attorney	to help you fill out bank	ruptcy forms?	
Yes.	Name of person		_ Attach Bankruptcy P Signature (Official Fo	Petition Preparer's Notice, Declaration, and porm 119).	
		e that I have read the summa	ry and schedules filed w	ith this declaration and	
that they	r are true and correct.	12 . 1.			
🗶 /s/ Shata	ara Brooks Yhala	TO DANKA	×		
Signature	of Debtor 1		Signature	of Debtor 2	
Date 9/2:			Date		
MN	//DD/YYYY		MM	I/DD/YYYY	

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 72 of 74

***********	First Nar	ne	Middle Name	Last Name		A STATE OF THE PROPERTY AND ADDRESS OF THE PROPERTY AND AD
28.		ears before you fi or other parties.	led for bankruptcy, did y	ou give a financial statem	ent to anyone about your business? Include	de all financial institutions
	✓ No Yes. Fil	l in the details belo	ow.			
	postorigos			Date issued		
	Name	<u> </u>		MM/DD/YYYY	-	
	Numb	er Street				
	City	Sta	te Zip Code			
Par	12: Sign	Below				
	true and cor bankruptcy o	rect. I understand	d that making a false sta fines up to \$250,000, or	tement, concealing prope	ents, and I declare under penalty of perjury ty, or obtaining money or property by frau years, or both. 18 U.S.C. §§ 152, 1341, 1519	d in connection with a
		Signature of D	Debtor 1	***************************************	Signature of Debtor 2	
		Date 9/23/20	016		Date 9/23/2016	
	Did you attac	ch additional pag	es to Your Statement of	f Financial Affairs for Indiv	iduals Filing for Bankruptcy (Official Form	ı 107)?
	✓ No					
	Yes					
	Did you pay	or agree to pay s	omeone who is not an at	ttorney to help you fill out	pankruptcy forms?	
	✓ No					
	V INO					

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 73 of 74

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Brooks, Shatara ;	Case No	
	Debtor(s)	Chapter. Chapter13	
	VERIFICATION	ON OF CREDITOR MATRIX	
	The above named Debtors hereby verify that the	e attached list of creditors is true and correct to the best of their kr	owledge
Date:	9/23/2016	/s/Brooks, Shatara BNUKS / Shatana	
		Brooks, Shatara Signature of Debtor	
		/s/	
		Signature of Joint Debtor	

Case 16-30334 Doc 1 Filed 09/23/16 Entered 09/23/16 12:29:48 Desc Main Document Page 74 of 74

	First Name	Middle Name	Last Name	
16.	Calculate the median family in	come that applies to you	ou. Follow these steps:	
	16a. Fill in the state in which you	live.	Illinois	
	16b. Fill in the number of people	in your household.	3	
٠	16c. Fill in the median family inco To find a list of applicable m may also be available at the	nedian income amounts, g	te of household go online using the link specified in the separate instructions for this form. This list	\$72,429.00
17.	How do the lines compare?			
			top of page 1 of this form, check box 1, Disposable income is not determined under fill out Calculation of Disposable Income (Official Form 122C-2).	
	1325(b)(3). Go to Part	ine 16c. On the top of page t 3 and fill out Calculation come from line 14 above.	e 1 of this form, check box 2, <i>Disposable income is determined under 11 U.S.C.</i> § ion of Disposable Income (Official Form 122C-2). On line 39 of that form, copy	
art	3: Calculate Your Comm	itment Period Unde	er 11 U.S.C. §1325(b)(4)	
18.	Copy your total average monti	hly income from line 11.	•	\$4,500.00
19.	Deduct the marital adjustmen commitment period under 11 U.S.	t if it applies. If you are n .C. § 1325(b)(4) allows you	married, your spouse is not filing with you, and you contend that calculating the u to deduct part of your spouse's income, copy the amount from line 13.	
	19a. If the marital adjustment doe	es not apply, fill in 0 on line	e 19a.	-\$0.00
00	19b. Subtract line 19a from lin		Tallanu the conceptors of	\$4,500.00
20.	Calculate your current monthly	y income for the year. Fo	ollow triese steps:	\$4,500.00
	20a. Copy line 19b.		Anno de la compansión d	
	Multiply by 12 (the number of	of months in a year).	1	x 12
	20b. The result is your current m	onthly income for the year	r for this part of the form.	\$54,000.00
	20c. Copy the median family inco	ome for your state and size	e of household from line 16c.	\$72,429.00
21.	How do the lines compare?			
	Line 20b is less than line 20c period is 3 years. Go to Part		ed by the court, on the top of page 1 of this form, check box 3, The commitment	
	Line 20b is more than or equ commitment period is 5 years		erwise ordered by the court, on the top of page 1 of this form, check box 4, The	
art	4: Sign Below			
	By signing here, I declare un	der penalty of perjury that	t the information on this statement and in any attachments is true and correct.	
		With the	ank o	
	★ /s/ Shatara Brooks	Juana Ny	///(C) ×	
	Signature of Debtor 1		Signature of Debtor 2	
	Date 9/23/2016 MM/DD/YYYY		Date MM/DD/YYYY	
	If you checked 17a, do NOT If you checked 17b, fill out Fo	fill out or file Form 122C-2 orm 122C-2 and file it with t	2. this form. On line 39 of that form, copy your current monthly income from line 14 above	e.